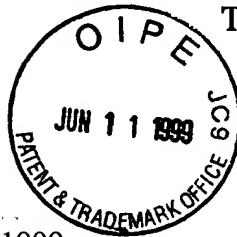


GRU 3735\$

WAYNE J. COLTON, INC.

Patent Prosecution ~ United States Patent and Trademark Office

The Milam Building Suite 1108
115 East Travis Street
San Antonio, Texas 78205



Tel: (210) 222-8455
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June 11, 1999

PATENTS

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Box CPA
Assistant Comm'r for Patents
Washington, D.C. 20231

JUN 16 1999

Group 3700

| | |
|---------------------|--|
| RE: Invention Title | WOUND THERAPY DEVICE AND RELATED METHODS |
| Serial Number | 08/951,832 |
| Filing Date | October 16, 1997 |
| Inventor(s) | Cesar Z. LINA <i>et al.</i> |
| Docket Number | 1001.1010 |

Dear Sir:

Enclosed herewith for filing in the above referenced matter, please find the following:

1. Continued Prosecution Application; and
2. Addressed postcard to be returned upon receipt.

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR §1.10)

"Express Mail" Mailing Label No: EL295473803US

Date of Deposit: June 11, 1999

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service, under 37 CFR §1.10, on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

06/11/99
Date:

Brian Goode
Signature of Person Mailing

Brian Goode
Printed Name of Person Mailing

WAYNE J. COLTON, INC.

- [] No fee is required with this filing.
- [X] Please charge Deposit Account No. 50-0489 in the amount of \$ 760.00. **A COPY OF THIS LETTER IS ATTACHED.**
- [] The Commissioner has been authorized to charge the requisite fee to Deposit Account No. 50-0489.
- [] A check in the amount of \$ *** is enclosed herewith.

GENERAL AUTHORIZATION TO CHARGE FEES: The Commissioner is hereby authorized to charge any additional fee as may be required under 37 CFR §§1.16 and/or 1.17 at any time during the prosecution of the above referenced application, or credit any overpayment, to Deposit Account No. 50-0489, without further or more specific authorization.

Respectfully submitted,

Dated: 06/11/99

WAYNE J. COLTON, INC.
The Milam Building Suite 1108
115 East Travis Street
San Antonio, Texas 78205
Telephone: 210 222 8455
Telecopier: 210 222 8445



Wayne J. Colton
Agent for Applicant
Registration No. 40,962

1001.1010
PATENT

PK
6/18/99

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Cesar Z. LINA

Serial No.: 08/951,832

Filed: October 16, 1997

Title: WOUND THERAPY DEVICE AND
RELATED METHODS



§ Group Art Unit: 3735
§ Examiner: RUHL, D.

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JUN 16 1999

Group 3700

#26

CONTINUED PROSECUTION APPLICATION

Box CPA
Assistant Comm'r for Patents
Washington, D.C. 20231

Sir:

Applicant respectfully requests continuation of the above-captioned application under the Continued Prosecution Application (CPA) procedure of 37 CFR §1.53(d).

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR §1.10)

"Express Mail" Mailing Label No.: EL295473803US

Date of Deposit: June 11, 1999

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service, under 37 CFR §1.10, on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

06/11/99
Date:

Brian Goode
Signature of Person Mailing

Brian Goode
Printed Name of Person Mailing

APPLICATION

The inventorship in the new application is the same as in the prior, above-captioned application and all claims of the new application are drawn only to subject matter disclosed and claimed in the prior application; therefore, no new declaration or oath is required. Please use all of the contents of the prior application's file wrapper, including the drawings and amendments and all affidavits and/or declarations, information disclosure statements, terminal disclaimers, petitions to correct inventorship, priority claims, deposit account authorizations, elections and/or ownership submissions, as the basic papers for the new application. The prior application is hereby expressly abandoned as of the filing date of this new application.

REQUISITE FEE

- A check in the amount of \$ *** is enclosed herewith.
- Please charge Deposit Account No. 50-0489 in the amount of \$ ***. **A COPY OF THIS LETTER IS ATTACHED.**
- The Commissioner has been authorized to charge the requisite fee of \$ 760.00 to Deposit Account No. 50-0489.

GENERAL AUTHORIZATION TO CHARGE FEES: The Commissioner is hereby authorized to charge any additional fee as may be required under 37 CFR §§1.16 and/or 1.17 at any time during the prosecution of the above referenced application, or credit any overpayment, to Deposit Account No. 50-0489, without further or more specific authorization.

Respectfully submitted,

Dated: 06/11/99

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